



272

TRANSMITTAL FORM

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|------------------------|----------------------------------|
| Application Number | 10/521,875 |
| Filing Date | August 5, 2005 |
| First Named Inventor | David Foster |
| Title | Orthopaedic Cement Mixing Device |
| Group Art Unit | 1797 |
| Examiner Name | David L. Sorkin |
| Attorney Docket Number | DHN/360/PC/US |
| Date | December 23, 2009 |

ENCLOSURES

- ☒ Response to Office Action ☐ Preliminary Amendment
- ☐ Information Disclosure Statement ☒ Postcard reflecting enclosures
- ☐ Other:
- ☒ It is hereby petitioned that any required extension of time be granted for filing the amendment. An extension of _____ month(s) having a fee of \$ _____ appears required.
- ☐ A check in the amount of \$ _____ is attached. Please credit any overpayment to Deposit Account 16-2563 of Alix, Yale & Ristas, LLP.

The Commissioner is hereby requested and authorized to charge Deposit Account 16-2563 of Alix, Yale & Ristas, LLP for any fee, not enclosed herewith, due for any reason in connection with the amendment or this or any other document accompanying the amendment, including (a) any filing fees under 37 CFR 1.16 for the presentation of extra claims and (b) any patent application processing fees under 37 CFR 1.17. *A duplicate copy of this sheet is attached.*

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual name Guy D. Yale Reg. No. 29,125

Signature [Signature]

Date December 23, 2009 Attorney's Docket No. DHN/360/PC/US

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited on the date below with the United States Postal Service as first class mail in an envelope addressed to "Mail Stop Amendment, Commissioner for Patents, United States Patent and Trademark Office, P.O. Box 1450, Alexandria, Virginia 22313-1450."

Typed or Printed Name Guy D. Yale Reg. No. 29,125

Signature [Signature] Date: December 23, 2009



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